## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Pateus
F.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mainted to the current correspondence address as a miniciated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate FEE ADDRESS\* for DADRESS\* for a part of FEE ADDRESS\* for a par maintenance fee notifications.

02292 75	90 01/25/2006 RT KOLASCH & BI VA 22040-0747			Note: A certificate of mailing can only be used for domestic mailings of the Feet) Transminal. This certificate cannot be used for any other accompanying the property of the		
APPLICATION NO.	FILING DATE	FIRST NAMED I		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/624,550 07/23/2003			Kenji Ishiguro		4670-0101P	7488
TITLE OF INVENTION: D	ISPOSABLE DIAPER 1	KAVING LE	G FLAT	AB X RBENT	ARTICLES	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	04/25/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS	7	
BOGART, MICHAEL G		3761		604-385010	_	
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AND	dence address (or Change of 22) attached. 122) attached. 150n (or "Fee Address" Indicor more recent) attached. Use PRESIDENCE DATA TO 18 an assignee is identified by 37 CFR 3.11. Completion IEEE	Correspondence ation form e of a Customer  BE PRINTED ON T elow, no assignee c of this form is NOT	(1) the nam or agents Ol (2) the nam registered a 2 registered listed, no na HE PATENT data will appea a substitute for	ar on the patent. If an assi or filing an assignment. :: (CITY and STATE OR O	ent attorneys s a member a mes of up to If no name is  gnee is identified below, the	H, STEWART, CH & BIRCH, LLP
	e assignee category or categ	ories (will not be pri	inted on the par	ent): 🔲 Individual 🖾	Corporation or other private g	roup entity Government
4a. The following fee(s) are enclosed:			b. Payment of Fee(s):			
Issue Fee			A check in the amount of the fee(s) is enclosed.			
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies4			Payment by credit card. Form PTO-2038 is attached.  The Director is borely authorized by charge the required fee(s) or credit any overnament to			
Advance Order - # 0	i Copies		☑ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2448 enclose an extra copy of this form).  ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2448.  ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2448.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required fee(s) are considered.  ☐ The Director is hereby authorized by charge the required by charge the required by charge the required by the required by charge the required by charge the required by charge the required by charge the			
5. Change in Entity Status	s (from status indicated abov SMALL ENTITY status. See		☐ h Annlica	nt is no longer claiming SM	ALL ENTITY status. See 37 (	CFR 1.27(e)(2)
					asly paid issue fee to the applic egistered attorney or agent; or	
Authorized Signature	1	13		Date	April 20, 20	006
Typed or printed name		iley		Registrati	on No32,881	
This collection of informati an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22313 Under the Paperwork Redu	on is equired by 37 CFR I. lity is governed by 35 U.S.6. pplication form to the USP' is for reducing this burden, gmia 22313-1450. DO NOT -1450. ction Act of 1995, no person	311. The information 122 and 37 CFR CO. Time will vary should be sent to the SEND FEES OR CO. It is are required to res	n is required to 1.14. This colli- depending up to Chief Inform COMPLETED spond to a colle	o obtain or retain a benefit b oction is estimated to take I on the individual case. Any ation Officer, U.S. Patent a FORMS TO THIS ADDRE oction of information unless	y the public which is to file (a 2 minutes to complete, includ comments on the amount of an Trademark Office, U.S. De SS. SEND TO: Commissione it displays a valid OMB contr	nd by the USPTO to process) ling gathering, preparing, and time you require to complete epartment of Commerce, P.O. er for Patents, P.O. Box 1450, rol number.